

Medicaid & Schools

Welcome

We are pleased to present the first edition of the Virginia Department of Education Medicaid newsletter. This publication is devoted to keeping Virginia Public School Divisions informed about Medicaid billing. Information will be provided about legislation regarding Medicaid, billing issues, critical happenings, training dates, current billing rates, and general information.

The Medicaid billing program is housed in the Special Education and Student Services Division at the Virginia Department of Education. Gwen Smith, school health specialist, Amy Edwards, Medicaid specialist, and Lissa Power-deFur, CCC-SLP/A, are the staff responsible for this program. As part of her role of the school health specialist, Gwen Smith is responsible for the school/community health services grant process, implementation of the grants, and overseeing Medicaid. Amy Edwards is responsible for technical assistance and Medicaid reports. Lissa Power-deFur, associate director of the student services division is a speech-language pathologist who assists with Medicaid issues. Their addresses and telephone numbers are provided below.

Gwen Smith, R.N., M.S.N.
School Health Specialist
Virginia Department of Education
Special Education and Student Services
P.O. Box 2120
Richmond, VA 23218
(804) 786-8671
Fax- (804) 371-8796
E-mail – gpsmith@pen.k12.va.us

Amy Edwards,
Medicaid Specialist
Virginia Department of Education
Special Education and Student Services
P.O. Box 2120
Richmond, VA 23218
(804) 692-0150
Fax- (804) 371-8796
E-mail – aedwards@pen.k12.va.us

Lissa Power-deFur, Ph-D, CCC-SLP/A
Associate Director Student Services
Virginia Department of Education
Special Education and Student Services
P.O. Box 2120
Richmond, VA 23218
(804) 225-2818
Fax- (804) 371-8796
E-mail- lpower-d@pen.k12.va.us

There is an increasing number of school divisions that are billing Medicaid for such services as physical therapy, occupational therapy, speech-language pathology, skilled nursing, eligibility and IEP meetings, and Early Periodic Screening, Diagnosis and Treatment (EPSDT).

The Virginia Department of Education is pleased to provide support to local school divisions as they pursue Medicaid reimbursement as an additional source of revenue. In the 1998-1999 school year, 77 school divisions had a provider participation agreement with the Department of Medical Assistance Services allowing them to bill Medicaid; however, only 39 of those school divisions billed Medicaid. Thirty-three of the 77 school divisions billed for rehabilitation services with reimbursement of \$888,520. This reflects the DMAS payment only and not the school division match. Ten school divisions billed for EPSDT services with reimbursement of \$95,753.22. The total reimbursement received by the schools billing for Medicaid was \$984,273.33.

We look forward to continued success with Medicaid billing.



H. Douglas Cox
Director of Special Education on Student Services

We need your help in naming this newsletter. Please submit a name to Amy Edwards. Also, if you have any information or articles regarding Medicaid or related issues, please send them to the address above.

Skilled Nursing and Individualized Education Program Regulations Passed by HCFA

In August 1999, the Health Care Financing Administration (HCFA) approved regulations for school-based skilled nursing and IEP meetings. These services have been covered by the Department of Medical Assistance Services (DMAS) since July 1, 1997, under emergency regulations. As a result, these services can be back-billed to July 1, 1997, provided that all proper documentation has been completed. The HCFA approval for skilled nursing services was for up to 90 minutes of care a day. In order to bill Medicaid for services that are over one year old, Block 10d of the HCFA 1500 form must have the word "attachment" and Block 24d must have a "22". The following statement must then be attached to the HCFA 1500 billing form: according to Cynthia Bosley at DMAS, "school-based skilled nursing and IEP meetings with the dates of service over one year old are allowed".

Tips for billing skilled nursing service:

1. Services **must** be included in the IEP.
2. A parental consent form to release information to Medicaid must be obtained before billing.
3. Services must be provided by a registered nurse or a licensed practical nurse (documentation of license must be on file at the Virginia Department of Education).
4. A Plan of Care for Skilled Nursing Services (Med-

10 form) must be completed.

5. Student Log of Skilled Nursing Procedures form must be completed. Please make sure that all information is complete. For example, make a comment for every procedure such as "no reaction", or write the reaction if it occurs.

A procedure must take at least 7 1/2 minutes before it can be counted as a 15-minute unit. For those procedures that take less than 7 1/2 minutes, determine an average amount of time it takes for the procedure and multiply that amount by the number of times each month that the service is delivered. Example: It takes 5 minutes to administer an oral medication. The student receives the medication 18 times in one month resulting in $(5 \times 18 = 90 \text{ minutes})$, 90 minutes divided by 15 (a unit) = 6). Six units of medication administered would be billed in that month.

When a registered nurse or a licensed practical nurse provides skilled nursing services to a Medicaid or Children's Medical Security Insurance Plan (CMSIP) recipient meeting the above criteria, the services are billable to the Department of Medical Assistance Services (DMAS).

Legislative Update

The 1999 General Assembly passed Medicaid-school-based services legislation that included a requirement that the Department of Education and the Department of Medical Assistance Services update the Interagency Agreement. This document includes a description and a history of IDEA, DMAS regulations, the purpose of the agreement, responsibilities of each agency, and implementation of this agreement.

The legislation allows for two additional categories of speech therapists to have services billed to DMAS. The Department of Medical Assistance Services, in collaboration with the Department of Education, has developed emergency regulations to implement the new legislation. These regulations and the ones described below in this Update section became effective January 12, 2000. The emergency regulations allow a speech-language pathologist licensed by the Board of Education, with an endorsement in speech language disorders preK-12 and a Master's degree in speech language pathology, to obtain a license without examination from the Board of Audiology and Speech-

Language Pathology. The Board of Audiology and Speech-Language Pathology has also promulgated regulations to establish this license.

The emergency regulations also recognize a speech-language pathologist, licensed by the Board of Education with an endorsement in speech-language disorders pre k-12, but does not hold a master's degree in speech-language pathology. This pathologist must be directly supervised by one of the other categories of DMAS recognized school-based speech therapists. Supervision must take place once a month and documented in the therapy notes.

Please note that there are application and renewal fees to obtain the Speech-Language Pathologist license from the Board of Audiology and Speech-Language Pathology.

The emergency regulations allow psychological evaluations and therapy to be covered when delivered by an individual who is licensed by the Board of Medicine and practices as a psychiatrist or by psychologists licensed by the Board of Psychology as clinical psychologists or by school psychologists-limited, licensed by the Board of Psychology. The Board of Psychology has also promulgated regulations to establish this license.

Skilled nursing services have been increased to 6.5 hours a day from 90 minutes a day.

These emergency regulations have been signed by Governor Gilmore and have been filed with the Virginia Registrar of Regulations as of January 12, 2000. These regulations were published on February 14, 2000. The proposed final regulations are in development by DMAS. These will be distributed to the school divisions as part of the public comment period under the state regulatory process.

Please note that the speech-language pathologist and the school psychologist-limited license must be submitted to and approved by the Virginia Department of Education before services can be billed.

DMAS has increased the number of visits for pre-authorizations of school-based rehabilitative services from 24 to 35 visits. The DMAS computer changes will occur shortly and are retroactive to January 12, 2000. Please call Amy Edwards (804-692-0150) to confirm that the changes have been made by DMAS.

Outreach Billing

Since January 1995, school divisions have been permitted to bill for outreach services. Outreach services include: speaking to PTA meetings about Medicaid and EPSDT, flyers informing parents about Medicaid services, group session informing parents how to complete the Medicaid application and any group activity informing parents or guardians about Medicaid and its services. "One-on-one" meetings with parents or guardians would not be reimbursable services.

The Department of Medical Assistance Services will review all outstanding outreach documentation for possible back billing. Please submit all documentation to Amy Edwards.

Outreach is currently in the interagency agreement between the Department of Education and the Department of Medical Assistance Services. DMAS is reviewing its involvement in school-based outreach. School divisions will be kept abreast of developments in this area.

Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

Immunization Billing:

When billing Medicaid for immunizations, use the "Y" procedure codes. Because providers cannot use the Free Vaccine for Kids on Children Medical Security Insurance Plan (CMSIP) recipient, providers may bill for the following: the CPT code, the "Y" codes, and if the immunization was the only procedure done, then a minimal office visit can be billed.

Lead Screenings:

According to the EPSDT schedule, a lead screen must be completed on a child by the age of 2. If a lead screen has not been completed by this age, it will be a required component of the EPSDT for children under 6. For information regarding lead screening, please call your local Health Department or the Lead Safe Virginia Program at the State Health Department at (804) 225-4455.

DMAS Computer Changes for EPSDT:

DMAS recently implemented computer systems changes which addressed the problem experienced by school divisions of an unexplained reduction in the non-Federal share of the DMAS payment for EPSDT services. If you still experience problems with this reimbursement, contact Amy Edwards immediately. First Health is currently working on an adjustment process looking back three years for EPSDT claims submitted by school divisions affected by this problem.

Special Education/EPSDT/Outreach Billing Rates as of July 1998:

School Divisions receive 51.67 percent of these billing rates for the special education services from October 1999 to September 2000. For October 2000 to September 2001, 51.85 percent is used.

Rehabilitation (Physical, Occupational, Speech Therapy)

Individual Session	\$ 83.40
Group Session	\$ 27.75
Assessment/Evaluation	\$100.28

Hearing Screen

Under Age 4	\$ 6
Over Age 4	\$ 8

Skilled Nursing Services \$ 6 for every 15 minutes

Eligibility Meeting

(Per meeting) \$ 50

IEP Meeting

(Per meeting)

EPSDT \$ 78.16 – \$88.20 + lab and Immunizations

Outreach

based on percent of Medicaid population in your locality or a portion of a locality (under revision)

March 2 & 3 Annual

Medicaid Training – Response to Questions

The School/Community Health Services Grant Medicaid Training was held at the Holiday Inn Golf and Conference Center in Staunton, Virginia. Numerous questions that arose are addressed as follows:

Group Therapy – at this time, DMAS considers a group to be no more than three students. If you have a group of more than three, do not bill Medicaid for the session.

Plan of Care – The Virginia Department of Medical Assistance Services now recognizes the IEP as being acceptable as the plan of care as long as the IEP includes all the required components of the Plan of Care. Several changes have been made to the forms to simplify the required documentation.

School divisions with Medicaid Provider Agreements will receive, with this newsletter, a disk that provides the Plan of Care (Med-8). Type on that form the area and the page number where that component is located in the IEP. Attach that portion of the IEP for the physician's review. A sample of this form will also be submitted with this newsletter.

Parental Consent Form: The parental consent form has been returned to its original format.

A physician must sign the Plan of Care - At this time, Nurse Practitioners are not approved by DMAS to sign the Plan of Care for rehabilitation services.

Skilled Nursing Service- Please refer to the "Skilled Nursing and IEP Regulations passed by HCFA" section of this news letter

EPSDT- If you are billing Medicaid for an EPSDT, all students that are receiving an EPSDT, Medicaid or not, must be billed. The EPSDT does not have to be offered to all students.

Reminders:

- In order to do laboratory tests (urinalysis, hemoglobin, blood sugars) in school-based health center site, a Clinical Laboratory Improvement Amendment (CLIA) waiver is required from the Virginia Department of Health, Center for Quality Health Care and Consumer Protection. The waiver will cost \$150. Write to the address below (DO NOT CALL) and request a CLIA waiver application.

Sarah Pendergrass
Virginia Department of Health
Center for Quality Health Care Service
And Consumer Protection
Suite 216
3600 W. Broad Street
Richmond, VA 23230

- Please submit a copy of your provider license upon renewal to the Virginia Department of Education c/o Amy Edwards. **If you have not submitted a current copy of your license, DO NOT BILL MEDICAID FOR REIMBURSEMENT.**
- Quarterly reports are DUE to the Department of Medical Assistance Services, Fiscal Director, 600 E. Broad Street, Richmond, VA 23219 and The Virginia Department of Education, Medicaid Specialist, P.O. Box 2120, Richmond, VA 23218 on the following dates:

July 15
October 15
January 15
April 15

Please send the original quarterly report to DMAS and a copy of the report to Amy Edwards, VA Department of Education.

- Rehabilitation services and EPSDT procedures received by children who are on the Children's Medical Security Insurance Plan (CMSIP) must be directly invoiced to DMAS.

- Remittance Vouchers for Medicaid Billing

Please check ALL remittance vouchers closely and report all discrepancies to Amy Edwards at the Virginia Department of Education. A copy of your letter will be forwarded to Jeff Nelson, policy analyst at the Department of Medical Assistance Services.

Quarterly Case Managers Meeting

For the Central and Tidewater Areas

The Department of Medical Assistance Services (DMAS) will sponsor Quarterly Case Managers meetings. These meetings offer providers the opportunity to open communications with the HMO's. If interested, please call Amy Edwards at the Department of Education.

The Virginia Department of Education does not unlawfully discriminate on the basis of sex, color, religion, disabilities, or national origin in employment or in its educational programs and activities.



Returned Service Requested

Richmond, Virginia 23218-2120

P. O. Box 2120

Office of Special Education and Student Services

Virginia Department of Education

Medicaid & Schools

We need your help in naming this newsletter. Please submit a name to Amy Edwards. Also, if you have any information or articles regarding Medicaid or related issues, please send them to the address below.

Amy Edwards,
Medicaid Specialist
Virginia Department of Education
Special Education and Student Services
P.O. Box 2120
Richmond, VA 23218
(804) 692-0150
Fax- (804) 371-8796
E-mail – aedwards@pen.k12.va.us